

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

SUPPORT TO ENSURE VICTORY EVERYWHERE PAC-STEVE PAC

ADDRESS (number and street)

228 S WASHINGTON ST STE 115

☐ Check if different than previously reported. (ACC)

ALEXANDRIA

VA

22314

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00501478

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☒ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Lisa Lisker

Signature of Treasurer

Lisa Lisker

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

SUPPORT TO ENSURE VICTORY EVERYWHERE PAC-STEVE PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
07 / 01 / 2013 To: M M / D D / Y Y Y Y Y Y  
12 / 31 / 2013

|   | COLUMN A<br>This Period  | COLUMN B<br>Calendar Year-to-Date                                    |
|---|--|--|
| 6. (a) Cash on Hand<br>January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span><br><span style="border: 1px solid black; padding: 2px;">2013</span> |  | <span style="border: 1px solid black; padding: 2px;">5311.15</span>  |
| (b) Cash on Hand at<br>Beginning of Reporting Period.....   | <span style="border: 1px solid black; padding: 2px;">10317.32</span> |  |
| (c) Total Receipts (from Line 19) .....   | <span style="border: 1px solid black; padding: 2px;">62500.00</span> | <span style="border: 1px solid black; padding: 2px;">90500.00</span> |
| (d) Subtotal (add Lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B).....   | <span style="border: 1px solid black; padding: 2px;">72817.32</span> | <span style="border: 1px solid black; padding: 2px;">95811.15</span> |
| 7. Total Disbursements (from Line 31) .....   | <span style="border: 1px solid black; padding: 2px;">67172.54</span> | <span style="border: 1px solid black; padding: 2px;">90166.37</span> |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)) .....   | <span style="border: 1px solid black; padding: 2px;">5644.78</span>  | <span style="border: 1px solid black; padding: 2px;">5644.78</span>  |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....   | <span style="border: 1px solid black; padding: 2px;">0.00</span>     |  |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | <span style="border: 1px solid black; padding: 2px;">0.00</span>     |  |



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

**SUPPORT TO ENSURE VICTORY EVERYWHERE PAC-STEVE PAC**

Report Covering the Period:

From:

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   | 0 | 1 |   | 2 | 0 | 1 | 3 |   |   |

To:

|   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 |   | 3 | 1 |   | 2 | 0 | 1 | 3 |   |   |

| I. Receipts  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From:   |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees  |                               |                                   |
| (i) Itemized (use Schedule A).....   | 12750.00                      | 12750.00                          |
| (ii) Unitemized .....  | 0.00                          | 0.00                              |
| (iii) TOTAL (add Lines 11(a)(i) and (ii))..... ►   | 12750.00                      | 12750.00                          |
| (b) Political Party Committees .....   | 0.00                          | 0.00                              |
| (c) Other Political Committees (such as PACs).....   | 49750.00                      | 77750.00                          |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) ..... ► | 62500.00                      | 90500.00                          |
| 12. Transfers From Affiliated/Other Party Committees.....  | 0.00                          | 0.00                              |
| 13. All Loans Received .....   | 0.00                          | 0.00                              |
| 14. Loan Repayments Received.....  | 0.00                          | 0.00                              |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....  | 0.00                          | 0.00                              |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....            | 0.00                          | 0.00                              |
| 17. Other Federal Receipts (Dividends, Interest, etc.).....  | 0.00                          | 0.00                              |
| 18. Transfers from Non-Federal and Levin Funds   |                               |                                   |
| (a) Non-Federal Account (from Schedule H3) .....   | 0.00                          | 0.00                              |
| (b) Levin Funds (from Schedule H5) .....   | 0.00                          | 0.00                              |
| (c) Total Transfers (add 18(a) and 18(b))..  | 0.00                          | 0.00                              |
| 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) ..... ►                        | 62500.00                      | 90500.00                          |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) ..... ►                                  | 62500.00                      | 90500.00                          |

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| II. Disbursements  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures:  |                               |                                   |
| (a) Allocated Federal/Non-Federal Activity (from Schedule H4)                                  |                               |                                   |
| (i) Federal Share .....  | 0.00                          | 0.00                              |
| (ii) Non-Federal Share.....  | 0.00                          | 0.00                              |
| (b) Other Federal Operating Expenditures .....   | 36172.54                      | 47166.37                          |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....                        | 36172.54                      | 47166.37                          |
| 22. Transfers to Affiliated/Other Party Committees.....  | 0.00                          | 0.00                              |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....         | 31000.00                      | 43000.00                          |
| 24. Independent Expenditures (use Schedule E) .....  | 0.00                          | 0.00                              |
| 25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....                   | 0.00                          | 0.00                              |
| 26. Loan Repayments Made.....  | 0.00                          | 0.00                              |
| 27. Loans Made.....  | 0.00                          | 0.00                              |
| 28. Refunds of Contributions To:   |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees .....                                  | 0.00                          | 0.00                              |
| (b) Political Party Committees .....   | 0.00                          | 0.00                              |
| (c) Other Political Committees (such as PACs).....   | 0.00                          | 0.00                              |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....                            | 0.00                          | 0.00                              |
| 29. Other Disbursements .....  | 0.00                          | 0.00                              |
| 30. Federal Election Activity (2 U.S.C. §431(20))  |                               |                                   |
| (a) Allocated Federal Election Activity (from Schedule H6)                                     |                               |                                   |
| (i) Federal Share .....  | 0.00                          | 0.00                              |
| (ii) "Levin" Share.....  | 0.00                          | 0.00                              |
| (b) Federal Election Activity Paid Entirely With Federal Funds .....                           | 0.00                          | 0.00                              |
| (c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....           | 0.00                          | 0.00                              |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..      | 67172.54                      | 90166.37                          |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 67172.54                      | 90166.37                          |

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| III. Net Contributions/Operating Expenditures  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans)<br>(from Line 11(d), page 3) .....          | 62500.00                      | 90500.00                          |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                              | 0.00                          | 0.00                              |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....      | 62500.00                      | 90500.00                          |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b)) ..... ► | 36172.54                      | 47166.37                          |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3).....                   | 0.00                          | 0.00                              |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) ..... ►              | 36172.54                      | 47166.37                          |

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 28  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**SUPPORT TO ENSURE VICTORY EVERYWHERE PAC-STEVE PAC**

Full Name (Last, First, Middle Initial)

## **A. Michael Bopp**

Mailing Address 1409 Bishop Lane

City State Zip Code  
 Alexandria VA 22302

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Gibson, Dunn & Crutcher

Occupation  
 Partner

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 07 22 2013

Transaction ID : SA11AI.4500

Amount of Each Receipt this Period

1250.00

Full Name (Last, First, Middle Initial)

## **B. Scott Styles**

Mailing Address 3609 N Rockingham Street

City State Zip Code  
 Arlington VA 22213

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 America's Health Insurance

Occupation  
 Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 31 2013

Transaction ID : SA11AI.4540

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

## **C. Abigail S. Wexner**

Mailing Address 3 Limited Parkway

City State Zip Code  
 Columbus OH 43230

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
 Homemaker

Occupation  
 Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 08 20 2013

Transaction ID : SA11AI.4522

Amount of Each Receipt this Period

5000.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

7750.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 7 OF 28

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**SUPPORT TO ENSURE VICTORY EVERYWHERE PAC-STEVE PAC**

Full Name (Last, First, Middle Initial)

**A. Leslie H Wexner**

Mailing Address 3 Limited Parkway

City State Zip Code  
Columbus OH 43230

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Limited Brands

Occupation

CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 20 / 2013

Transaction ID : SA11AI.4520

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

5000.00

12750.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 28  
(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**SUPPORT TO ENSURE VICTORY EVERYWHERE PAC-STEVE PAC**

Full Name (Last, First, Middle Initial)

## **A. AMERICAN ACADEMY OF FAMILY PHYSICIANS POLITICAL ACTION COMMITTEE**

Mailing Address 1133 CONNECTICUT AVE NW  
SUITE 1100

City State Zip Code  
WASHINGTON DC 20036

FEC ID number of contributing  
federal political committee.

**C** C00411553

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 30 / 2013

**Transaction ID : SA11C.4515**

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

## **B. AMERISOURCEBERGEN CORPORATION POLITICAL ACTION COMMITTEE (ABC PAC)**

Mailing Address 1300 MORRIS DRIVE  
SUITE 100

City State Zip Code  
CHESTERBROOK PA 19355

FEC ID number of contributing  
federal political committee.

**C** C00400929

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
08 / 20 / 2013

**Transaction ID : SA11C.4524**

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

## **C. BOEHRINGER INGELHEIM USA CORPORATION POLITICAL ACTION COMMITTEE**

Mailing Address 900 RIDGEBURY ROAD

City State Zip Code  
RIDGEBURY CT 06877

FEC ID number of contributing  
federal political committee.

**C** C00420398

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 18 / 2013

**Transaction ID : SA11C.4533**

Amount of Each Receipt this Period

5000.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

9000.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 9 OF 28  
(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**SUPPORT TO ENSURE VICTORY EVERYWHERE PAC-STEVE PAC**

Full Name (Last, First, Middle Initial)

## **A. BRIDGEPOINT EDUCATION INC. PAC**

Mailing Address 13500 EVENING CREEK DR. NORTH  
 SUITE 600

City State Zip Code  
 SAN DIEGO CA 92128

FEC ID number of contributing  
federal political committee.

**C** C00478404

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 23 2013

**Transaction ID : SA11C.4537**

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

## **B. ERNST & YOUNG POLITICAL ACTION COMMITTEE**

Mailing Address 1101 NEW YORK AVENUE, NW

City State Zip Code  
 WASHINGTON DC 20005

FEC ID number of contributing  
federal political committee.

**C** C00227744

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 08 20 2013

**Transaction ID : SA11C.4526**

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

## **C. FINANCIAL SERVICES ROUNDTABLE PAC**

Mailing Address 1001 PENNSYLVANIA AVENUE, NW  
 SUITE 500 SOUTH

City State Zip Code  
 WASHINGTON DC 20004

FEC ID number of contributing  
federal political committee.

**C** C00193177

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 20 2013

**Transaction ID : SA11C.4536**

Amount of Each Receipt this Period

2500.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

6500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
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PAGE 10 OF 28

☐ 11a ☐ 11b ☒ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**SUPPORT TO ENSURE VICTORY EVERYWHERE PAC-STEVE PAC**

Full Name (Last, First, Middle Initial)

## **A. GIBSON DUNN & CRUTCHER LLP PAC**

Mailing Address 333 SOUTH GRAND AVENUE

City State Zip Code  
 LOS ANGELES CA 90071

FEC ID number of contributing  
federal political committee.

**C** C00344754

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

**07** / **22** / **2013**

**Transaction ID : SA11C.4505**

Amount of Each Receipt this Period

1250.00

Full Name (Last, First, Middle Initial)

## **B. HUNTINGTON BANCSHARES INC. POLITICAL ACTION COMMITTEE (HBI-PAC)**

Mailing Address 41 S. HIGH ST

City State Zip Code  
 COLUMBUS OH 43287

FEC ID number of contributing  
federal political committee.

**C** C00165589

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**07** / **22** / **2013**

**Transaction ID : SA11C.4511**

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

## **C. INTERNATIONAL COUNCIL OF SHOPPING CENTERS INC POLITICAL ACTION COMMITTEE (ICSC PAC)**

Mailing Address 555 12TH STREET, NW  
 SUITE 660

City State Zip Code  
 WASHINGTON DC 20004

FEC ID number of contributing  
federal political committee.

**C** C00217638

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

**09** / **03** / **2013**

**Transaction ID : SA11C.4527**

Amount of Each Receipt this Period

2500.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

8750.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 28  
(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**SUPPORT TO ENSURE VICTORY EVERYWHERE PAC-STEVE PAC**

Full Name (Last, First, Middle Initial)

## **A. INVESTMENT COMPANY INSTITUTE POLITICAL ACTION COMMITTEE**

Mailing Address 1401 H STREET NW SUITE 1200

City State Zip Code  
WASHINGTON DC 20005

FEC ID number of contributing  
federal political committee.

**C** C00105981

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

**11** / **05** / **2013**

**Transaction ID : SA11C.4530**

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

## **B. NATIONAL EMERGENCY MEDICINE POLITICAL ACTION COMMITTEE**

Mailing Address 1125 EXECUTIVE CIRCLE

City State Zip Code  
IRVING TX 75038

FEC ID number of contributing  
federal political committee.

**C** C00140061

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

**07** / **30** / **2013**

**Transaction ID : SA11C.4513**

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

## **C. NATIONAL EMERGENCY MEDICINE POLITICAL ACTION COMMITTEE**

Mailing Address 1125 EXECUTIVE CIRCLE

City State Zip Code  
IRVING TX 75038

FEC ID number of contributing  
federal political committee.

**C** C00140061

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**12** / **31** / **2013**

**Transaction ID : SA11C.4539**

Amount of Each Receipt this Period

2500.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

7500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 28  
(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**SUPPORT TO ENSURE VICTORY EVERYWHERE PAC-STEVE PAC**

Full Name (Last, First, Middle Initial)

## **A. NATIONAL MULTI HOUSING COUNCIL POLITICAL ACTION COMMITTEE**

Mailing Address 1850 M STREET, NW  
SUITE 540

City State Zip Code  
WASHINGTON DC 20036

FEC ID number of contributing  
federal political committee.

**C** C00130773

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 22 / 2013

**Transaction ID : SA11C.4508**

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

## **B. PRICEWATERHOUSECOOPERS POLITICAL ACTION COMMITTEE I**

Mailing Address 1301 K STREET, NW  
SUITE 800W

City State Zip Code  
WASHINGTON DC 20005

FEC ID number of contributing  
federal political committee.

**C** C00107235

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 30 / 2013

**Transaction ID : SA11C.4517**

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

## **C. REPUBLICAN MAINSTREET PARTNERSHIP PAC**

Mailing Address C/O G&W 2201 WISCONSIN AVE., NW  
SUITE 320

City State Zip Code  
WASHINGTON DC 20007

FEC ID number of contributing  
federal political committee.

**C** C00165159

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 22 / 2013

**Transaction ID : SA11C.4503**

Amount of Each Receipt this Period

2500.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

7500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 OF 28

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**SUPPORT TO ENSURE VICTORY EVERYWHERE PAC-STEVE PAC**

Full Name (Last, First, Middle Initial)

## **A. REPUBLICAN MAINSTREET PARTNERSHIP PAC**

Mailing Address C/O G&W 2201 WISCONSIN AVE., NW  
 SUITE 320

City State Zip Code  
 WASHINGTON DC 20007

FEC ID number of contributing  
federal political committee.

**C** C00165159

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**11** / **18** / **2013**

**Transaction ID : SA11C.4532**

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

## **B. TERADATA CORPORATION POLITICAL ACTION COMMITTEE**

Mailing Address 7108 REBECCA DRIVE

City State Zip Code  
 ALEXANDRIA VA 22307

FEC ID number of contributing  
federal political committee.

**C** C00438655

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

**07** / **22** / **2013**

**Transaction ID : SA11C.4509**

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

## **C. THE AMERICAN CONGRESS OF OB-GYNs PAC (OB-GYN PAC)**

Mailing Address 409 12TH STREET, SW

City State Zip Code  
 WASHINGTON DC 20024

FEC ID number of contributing  
federal political committee.

**C** C00364158

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

**07** / **30** / **2013**

**Transaction ID : SA11C.4518**

Amount of Each Receipt this Period

2500.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

7500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 OF 28

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**SUPPORT TO ENSURE VICTORY EVERYWHERE PAC-STEVE PAC**

Full Name (Last, First, Middle Initial)

## **A. TUESDAY GROUP POLITICAL ACTION COMMITTEE**

Mailing Address P. O. BOX 11586

City State Zip Code  
WASHINGTON DC 20008

FEC ID number of contributing  
federal political committee.

**C** C00433060

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 13 2013

**Transaction ID : SA11C.4535**

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

## **B. WELLPOINT, INC. WELLPAC**

Mailing Address 120 MONUMENT CIRCLE

City State Zip Code  
INDIANAPOLIS IN 46204

FEC ID number of contributing  
federal political committee.

**C** C00197228

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
07 22 2013

**Transaction ID : SA11C.4507**

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

## **C.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

3000.00

49750.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**SUPPORT TO ENSURE VICTORY EVERYWHERE PAC-STEVE PAC**

Full Name (Last, First, Middle Initial)

**A. Bogart Associates, Inc.**

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 0 | 8 |   |   | 2 | 0 | 1 | 3 |   |   |

Mailing Address 1200 Trinity Dr.

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Alexandria | VA    | 22314    |

**Transaction ID : SB21B.4430**Purpose of Disbursement  
Fundraising Consulting

Amount of Each Disbursement this Period

Candidate Name

|                   |
|-------------------|
| Category/<br>Type |
|-------------------|

1500.00

|                |   |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |
| State:         | District:   |

|                   |   |
|-------------------|---|
| Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
|-------------------|---|

Full Name (Last, First, Middle Initial)

**B. Bogart Associates, Inc.**

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 1 | 5 |   |   | 2 | 0 | 1 | 3 |   |   |

Mailing Address 1200 Trinity Dr.

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Alexandria | VA    | 22314    |

**Transaction ID : SB21B.4431**Purpose of Disbursement  
Event Catering

Amount of Each Disbursement this Period

Candidate Name

|                   |
|-------------------|
| Category/<br>Type |
|-------------------|

2990.00

|                |   |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |
| State:         | District:   |

|                   |   |
|-------------------|---|
| Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
|-------------------|---|

Full Name (Last, First, Middle Initial)

**C. Bogart Associates, Inc.**

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 0 | 7 |   |   | 3 | 1 |   |   | 2 | 0 | 1 | 3 |   |   |

Mailing Address 1200 Trinity Dr.

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Alexandria | VA    | 22314    |

**Transaction ID : SB21B.4432**Purpose of Disbursement  
Fundraising Consulting

Amount of Each Disbursement this Period

Candidate Name

|                   |
|-------------------|
| Category/<br>Type |
|-------------------|

4500.00

|                |   |
|----------------|---|
| Office Sought: | <input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |
| State:         | District:   |

|                   |   |
|-------------------|---|
| Disbursement For: | <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
|-------------------|---|

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

8990.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**SUPPORT TO ENSURE VICTORY EVERYWHERE PAC-STEVE PAC**

Full Name (Last, First, Middle Initial)

**A. Bogart Associates, Inc.**

Mailing Address 1200 Trinity Dr.

City Alexandria      State VA      Zip Code 22314

Purpose of Disbursement  
Fundraising Consulting

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
08 / 05 / 2013
**Transaction ID : SB21B.4433**

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

**B. Bogart Associates, Inc.**

Mailing Address 1200 Trinity Dr.

City Alexandria      State VA      Zip Code 22314

Purpose of Disbursement  
Fundraising Consulting/Catering

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 21 / 2013
**Transaction ID : SB21B.4434**

Amount of Each Disbursement this Period

1528.68

Full Name (Last, First, Middle Initial)

**C. Bogart Associates, Inc.**

Mailing Address 1200 Trinity Dr.

City Alexandria      State VA      Zip Code 22314

Purpose of Disbursement  
Fundraising Consulting

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 11 / 2013
**Transaction ID : SB21B.4435**

Amount of Each Disbursement this Period

1500.00

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4528.68



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**SUPPORT TO ENSURE VICTORY EVERYWHERE PAC-STEVE PAC**

Full Name (Last, First, Middle Initial)

**A. Bogart Associates, Inc.**

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 1 | 1 |   | 1 | 2 |   |   | 2 | 0 | 1 | 3 |   |   |

Mailing Address 1200 Trinity Dr.

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Alexandria | VA    | 22314    |

**Transaction ID : SB21B.4436**Purpose of Disbursement  
Fundraising Consulting/Catering

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

3498.98

|                |                                    |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House     |
|                | <input type="checkbox"/> Senate    |
|                | <input type="checkbox"/> President |

|   |
|---|
| Disbursement For:   |
| <input type="checkbox"/> Primary <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼                        |

State: District:

Full Name (Last, First, Middle Initial)

**B. Bogart Associates, Inc.**

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 |   |   | 1 | 0 |   |   | 2 | 0 | 1 | 3 |   |   |

Mailing Address 1200 Trinity Dr.

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Alexandria | VA    | 22314    |

**Transaction ID : SB21B.4437**Purpose of Disbursement  
Fundraising Consulting

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

1500.00

|                |                                    |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House     |
|                | <input type="checkbox"/> Senate    |
|                | <input type="checkbox"/> President |

|   |
|---|
| Disbursement For:   |
| <input type="checkbox"/> Primary <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼                        |

State: District:

Full Name (Last, First, Middle Initial)

**C. Bogart Associates, Inc.**

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | M | / | D | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 2 |   |   | 1 | 2 | 9 |   | 2 | 0 | 1 | 3 |   |   |

Mailing Address 1200 Trinity Dr.

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| Alexandria | VA    | 22314    |

**Transaction ID : SB21B.4438**Purpose of Disbursement  
Fundraising Consulting

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

1500.00

|                |                                    |
|----------------|------------------------------------|
| Office Sought: | <input type="checkbox"/> House     |
|                | <input type="checkbox"/> Senate    |
|                | <input type="checkbox"/> President |

|   |
|---|
| Disbursement For:   |
| <input type="checkbox"/> Primary <input type="checkbox"/> General |
| <input type="checkbox"/> Other (specify) ▼                        |

State: District:

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

6498.98

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
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☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**SUPPORT TO ENSURE VICTORY EVERYWHERE PAC-STEVE PAC**

Full Name (Last, First, Middle Initial)

**A. Citi Cards**

Mailing Address PO Box 183113

City Columbus    State OH    Zip Code 43218

Purpose of Disbursement  
Credit Card Payment--See Memos

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:    District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 22 / 2013
**Transaction ID : SB21B.4450**

Amount of Each Disbursement this Period

2093.06

Full Name (Last, First, Middle Initial)

**B. Hotel Hershey**

Mailing Address 100 Hotel Road

City Hershey    State PA    Zip Code 17033

Purpose of Disbursement  
Travel

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:    District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 22 / 2013
**Transaction ID : SB21B.4450.0**

Amount of Each Disbursement this Period

1492.58

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Enterprise Rent A Car**

Mailing Address 600 Corporate Park Drive

City St Louis    State MO    Zip Code 63105

Purpose of Disbursement  
Travel

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:    District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 22 / 2013
**Transaction ID : SB21B.4450.4**

Amount of Each Disbursement this Period

407.47

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2093.06

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**SUPPORT TO ENSURE VICTORY EVERYWHERE PAC-STEVE PAC**

Full Name (Last, First, Middle Initial)

**A. Crotty Consulting, LLC**

Mailing Address 2558 Wexford Road

City Columbus    State OH    Zip Code 43221

Purpose of Disbursement  
Fundraising Consulting

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:    District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07    08    2013
**Transaction ID : SB21B.4429**

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

**B. Crotty Consulting, LLC**

Mailing Address 2558 Wexford Road

City Columbus    State OH    Zip Code 43221

Purpose of Disbursement  
Fundraising Consulting

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:    District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
08    21    2013
**Transaction ID : SB21B.4447**

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

**C. Crotty Consulting, LLC**

Mailing Address 2558 Wexford Road

City Columbus    State OH    Zip Code 43221

Purpose of Disbursement  
Fundraising Consulting

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:    District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09    21    2013
**Transaction ID : SB21B.4448**

Amount of Each Disbursement this Period

1500.00

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

6000.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**SUPPORT TO ENSURE VICTORY EVERYWHERE PAC-STEVE PAC**

Full Name (Last, First, Middle Initial)

**A. Crotty Consulting, LLC**

Mailing Address 2558 Wexford Road

City Columbus    State OH    Zip Code 43221

Purpose of Disbursement  
Fundraising Consulting

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:    District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 29 / 2013
**Transaction ID : SB21B.4449**

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

**B. Hotel Hershey**

Mailing Address 100 Hotel Road

City Hershey    State PA    Zip Code 17033

Purpose of Disbursement  
Event Catering

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:    District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 04 / 2013
**Transaction ID : SB21B.4460**

Amount of Each Disbursement this Period

3804.28

Full Name (Last, First, Middle Initial)

**C. Huckaby Davis Lisker, Inc.**Mailing Address 228 S. Washington Street  
Suite 115

City Alexandria    State VA    Zip Code 22314

Purpose of Disbursement  
Compliance Consulting

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:    District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 31 / 2013
**Transaction ID : SB21B.4462**

Amount of Each Disbursement this Period

140.15

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5444.43

|                                     |     |                          |     |                          |     |                          |     |                          |    |                          |     |
|-------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|-----|
| <input checked="" type="checkbox"/> | 21b | <input type="checkbox"/> | 22  | <input type="checkbox"/> | 23  | <input type="checkbox"/> | 24  | <input type="checkbox"/> | 25 | <input type="checkbox"/> | 26  |
| <input type="checkbox"/>            | 27  | <input type="checkbox"/> | 28a | <input type="checkbox"/> | 28b | <input type="checkbox"/> | 28c | <input type="checkbox"/> | 29 | <input type="checkbox"/> | 30b |

SUPPORT TO ENSURE VICTORY EVERYWHERE PAC-STEVE PAC

36138.54

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 22 OF 28

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

**SUPPORT TO ENSURE VICTORY EVERYWHERE PAC-STEVE PAC**

Full Name (Last, First, Middle Initial)

**A. BENISHEK FOR CONGRESS, INC.**

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 06    |   | 2013        |

Mailing Address PO BOX 108

|           |       |          |
|-----------|-------|----------|
| City      | State | Zip Code |
| GLADSTONE | MI    | 49837    |

**Transaction ID : SB23.4440**Purpose of Disbursement  
Political Contribution

011

Amount of Each Disbursement this Period

|         |
|---------|
| 1000.00 |
|---------|

Candidate Name

**DANIEL J. BENISHEK MD**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MI District: 01

Full Name (Last, First, Middle Initial)

**B. BYRNE FOR CONGRESS INC**

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 11    |   | 19    |   | 2013        |

Mailing Address PO BOX 2743

|        |       |          |
|--------|-------|----------|
| City   | State | Zip Code |
| MOBILE | AL    | 36652    |

**Transaction ID : SB23.4441**Purpose of Disbursement  
Political Contribution

011

Amount of Each Disbursement this Period

|         |
|---------|
| 1000.00 |
|---------|

Candidate Name

**BRADLEY ROBERTS BYRNE**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2013  
☐ Primary ☐ General  
☒ Other (specify) ▼  
Special-General

State: AL District: 01

Full Name (Last, First, Middle Initial)

**C. CHUCK FLEISCHMANN FOR CONGRESS COMMITTEE, INC.**

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12    |   | 04    |   | 2013        |

Mailing Address P.O. BOX 11091

|             |       |          |
|-------------|-------|----------|
| City        | State | Zip Code |
| CHATTANOOGA | TN    | 37401    |

**Transaction ID : SB23.4444**Purpose of Disbursement  
Political Contribution

011

Amount of Each Disbursement this Period

|         |
|---------|
| 1000.00 |
|---------|

Candidate Name

**CHARLES J FLEISCHMANN**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: TN District: 03

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

|         |
|---------|
| 3000.00 |
|---------|

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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 23 OF 28

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

**SUPPORT TO ENSURE VICTORY EVERYWHERE PAC-STEVE PAC**

Full Name (Last, First, Middle Initial)

**A. FL-13 NOMINEE FUND**

Mailing Address 320 FIRST ST SE

City  
WASHINGTONState  
DCZip Code  
20003

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2014

☐ Primary ☐ General  
☒ Other (specify) ▼

State:

District:

Special-General

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12    | / | 29    | / | 2013        |

**Transaction ID : SB23.4452**

Amount of Each Disbursement this Period

|         |
|---------|
| 1000.00 |
|---------|

Full Name (Last, First, Middle Initial)

**B. FRIENDS OF JOE HECK**

Mailing Address PO BOX 750114

City  
LAS VEGASState  
NVZip Code  
89136Purpose of Disbursement  
Political Contribution

Candidate Name

**JOE HECK**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify) ▼

State: NV

District: 03

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12    | / | 30    | / | 2013        |

**Transaction ID : SB23.4455**

Amount of Each Disbursement this Period

|         |
|---------|
| 1000.00 |
|---------|

Full Name (Last, First, Middle Initial)

**C. GARY MILLER FOR CONGRESS**

Mailing Address 721 S BREA CANYON RD STE 7

City  
DIAMOND BARState  
CAZip Code  
91789Purpose of Disbursement  
Political Contribution

Candidate Name

**GARY G MILLER**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify) ▼

State: CA

District: 31

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    | / | 06    | / | 2013        |

**Transaction ID : SB23.4457**

Amount of Each Disbursement this Period

|         |
|---------|
| 1000.00 |
|---------|

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

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| 3000.00 |
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 24 OF 28

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

**SUPPORT TO ENSURE VICTORY EVERYWHERE PAC-STEVE PAC**

Full Name (Last, First, Middle Initial)

**A. IOWANS FOR LATHAM**

Mailing Address PO BOX 8237

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| DES MOINES | IA    | 50301    |

Purpose of Disbursement  
Political Contribution

Candidate Name

**THOMAS LATHAM**Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify) ▼

State: IA District: 03

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 06    |   | 2013        |

**Transaction ID : SB23.4467**

Amount of Each Disbursement this Period

|         |
|---------|
| 1000.00 |
|---------|

Full Name (Last, First, Middle Initial)

**B. JAIME FOR CONGRESS**

Mailing Address PO BOX 1614

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| RIDGEFIELD | WA    | 98642    |

Purpose of Disbursement  
Political Contribution

Candidate Name

**JAIME HERRERA BEUTLER**Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify) ▼

State: WA District: 03

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12    |   | 04    |   | 2013        |

**Transaction ID : SB23.4469**

Amount of Each Disbursement this Period

|         |
|---------|
| 1000.00 |
|---------|

Full Name (Last, First, Middle Initial)

**C. JASON SMITH FOR CONGRESS**

Mailing Address PO BOX 1324

|                |       |          |
|----------------|-------|----------|
| City           | State | Zip Code |
| CAPE GIRARDEAU | MO    | 63702    |

Purpose of Disbursement  
Political Contribution

Candidate Name

**JASON SMITH**Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2014

☒ Primary ☐ General  
☐ Other (specify) ▼

State: MO District: 08

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    |   | 31    |   | 2013        |

**Transaction ID : SB23.4475**

Amount of Each Disbursement this Period

|         |
|---------|
| 1000.00 |
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**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

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| 3000.00 |
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 25 OF 28

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

**SUPPORT TO ENSURE VICTORY EVERYWHERE PAC-STEVE PAC**

Full Name (Last, First, Middle Initial)

**A. JENKINS FOR CONGRESS**

Mailing Address PO BOX 727

|            |       |          |
|------------|-------|----------|
| City       | State | Zip Code |
| HUNTINGTON | WV    | 25711    |

Purpose of Disbursement  
Political Contribution

Candidate Name

**EVAN H JENKINS**

|                |  |
|----------------|--|
| Office Sought: | <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |
| State: WV      | District: 03   |

|  |
|--|
| Disbursement For: 2014   |
| <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 12    | / | 29    | / | 2013        |

**Transaction ID : SB23.4477**

Amount of Each Disbursement this Period

|         |
|---------|
| 1000.00 |
|---------|

Full Name (Last, First, Middle Initial)

**B. JOHNSON FOR CONGRESS**

Mailing Address PO BOX 14496

|        |       |          |
|--------|-------|----------|
| City   | State | Zip Code |
| POLAND | OH    | 44514    |

Purpose of Disbursement  
Political Contribution

Candidate Name

**BILL JOHNSON**

|                |  |
|----------------|--|
| Office Sought: | <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |
| State: OH      | District: 06   |

|  |
|--|
| Disbursement For: 2014   |
| <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    | / | 21    | / | 2013        |

**Transaction ID : SB23.4480**

Amount of Each Disbursement this Period

|         |
|---------|
| 2000.00 |
|---------|

Full Name (Last, First, Middle Initial)

**C. LEE TERRY FOR CONGRESS**

Mailing Address PO BOX 540098

|       |       |          |
|-------|-------|----------|
| City  | State | Zip Code |
| OMAHA | NE    | 68154    |

Purpose of Disbursement  
Political Contribution

Candidate Name

**LEE TERRY**

|                |  |
|----------------|--|
| Office Sought: | <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President |
| State: NE      | District: 02   |

|  |
|--|
| Disbursement For: 2014   |
| <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    | / | 06    | / | 2013        |

**Transaction ID : SB23.4482**

Amount of Each Disbursement this Period

|         |
|---------|
| 1000.00 |
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

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| 4000.00 |
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|  | 21b |  | 22  | X | 23  |  | 24  |  | 25 |  | 26  |
|  | 27  |  | 28a |   | 28b |  | 28c |  | 29 |  | 30b |

SUPPORT TO ENSURE VICTORY EVERYWHERE PAC-STEVE PAC

## A. LOBIONDO FOR CONGRESS

Date of Disbursement

Transaction ID : SB23.4485

011

Amount of Each Disbursement this Period

Category/  
Type

1000.00

☒ Primary ☐ General  
☐ Other (specify) ▼

State: NJ District: 02

## B. MICHAEL GRIMM FOR CONGRESS

Date of Disbursement

MM / DD / YYYY

|               |       |          |
|---------------|-------|----------|
| City          | State | Zip Code |
| STATEN ISLAND | NY    | 10306    |

Transaction ID : SB23.4488

011

Amount of Each Disbursement this Period

Category/  
Type

☒ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 13

### C. NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE

Date of Disbursement

08 / 01 / 2013

| City       | State | Zip Code |
|------------|-------|----------|
| WASHINGTON | DC    | 20003    |

Transaction ID : SB23.4491

Amount of Each Disbursement this Period

Category/  
Type

12000.00

☐ Primary ☐ General  
☒ Other (specify) ▼

State:  District:

**SUBTOTAL** of Disbursements This Page (optional).....

14000.00

**TOTAL** This Period (last page this line number only).....

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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 27 OF 28

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22  | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 24  | <input type="checkbox"/> 25 | <input type="checkbox"/> 26  |
| <input type="checkbox"/> 27  | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b           | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (In Full)

**SUPPORT TO ENSURE VICTORY EVERYWHERE PAC-STEVE PAC**

Full Name (Last, First, Middle Initial)

**A. ROTHFUS FOR CONGRESS**

Mailing Address PO BOX 435

|                   |             |                   |
|-------------------|-------------|-------------------|
| City<br>SEWICKLEY | State<br>PA | Zip Code<br>15143 |
|-------------------|-------------|-------------------|

Purpose of Disbursement  
Political Contribution

Candidate Name

**MR. KEITH ROTHFUS**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: PA District: 12

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 06    |   | 2013        |

**Transaction ID : SB23.4492**

Amount of Each Disbursement this Period

|         |
|---------|
| 1000.00 |
|---------|

Full Name (Last, First, Middle Initial)

**B. SCOTT RIGELL FOR CONGRESS**Mailing Address 915 FIRST COLONIAL ROAD  
SUITE 100

|                        |             |                   |
|------------------------|-------------|-------------------|
| City<br>VIRGINIA BEACH | State<br>VA | Zip Code<br>23454 |
|------------------------|-------------|-------------------|

Purpose of Disbursement  
Political Contribution

Candidate Name

**MR. EDWARD SCOTT RIGELL**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: VA District: 02

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 06    |   | 2013        |

**Transaction ID : SB23.4493**

Amount of Each Disbursement this Period

|         |
|---------|
| 1000.00 |
|---------|

Full Name (Last, First, Middle Initial)

**C. TOM REED FOR CONGRESS**

Mailing Address PO BOX 391

|                |             |                   |
|----------------|-------------|-------------------|
| City<br>GENEVA | State<br>NY | Zip Code<br>14456 |
|----------------|-------------|-------------------|

Purpose of Disbursement  
Political Contribution

Candidate Name

**THOMAS W REED II**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 23

Date of Disbursement

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 09    |   | 06    |   | 2013        |

**Transaction ID : SB23.4497**

Amount of Each Disbursement this Period

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| 1000.00 |
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

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| 3000.00 |
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|--|-----|--|-----|----------|-----|--|-----|--|----|--|-----|
|  | 21b |  | 22  | <b>X</b> | 23  |  | 24  |  | 25 |  | 26  |
|  | 27  |  | 28a |          | 28b |  | 28c |  | 29 |  | 30b |

SUPPORT TO ENSURE VICTORY EVERYWHERE PAC-STEVE PAC

### A. WALTERS FOR CONGRESS

Date of Disbursement

Transaction ID : SB23.4494

011

Amount of Each Disbursement this Period

Category/  
Type

Disbursement For: 2014

☒ Primary ☐ General

☐ Other (specify) ▼

1000.00

**B.**

Date of Disbursement

### Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

Disbursement For:

|                          |                   |                          |         |
|--------------------------|-------------------|--------------------------|---------|
| <input type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                          |         |

State:  District:

**C.**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

| City | State | Zip Code |
|------|-------|----------|
|------|-------|----------|

### Purpose of Disbursement

Candidate Name

Category/  
Type

Amount of Each Disbursement this Period

Disbursement For:

|                          |                   |                          |         |
|--------------------------|-------------------|--------------------------|---------|
| <input type="checkbox"/> | Primary           | <input type="checkbox"/> | General |
| <input type="checkbox"/> | Other (specify) ▼ |                          |         |

State:  District:

**SUBTOTAL** of Disbursements This Page (optional).....

1000.00

**TOTAL** This Period (last page this line number only).....

31000.00